

OFFICE OF THE CHIEF OF POLICE

SPECIAL ORDER NO. 18

May 16, 2008

**SUBJECT:** ACTIVATION OF THE SCIENTIFIC INVESTIGATION DIVISION, WITNESS CRITIQUE FORM, FORM 10.30.00 AND RECORDS AND IDENTIFICATION, CRIMINAL IDENTIFICATION SECTION, WITNESS CRITIQUE FORM, FORM 10.31.00

**PURPOSE:** In order to ensure the quality of expert witness testimony given by Los Angeles Police Department (LAPD) criminalists, Scientific Investigation Division (SID) implemented the use of the Witness Critique Form, LAPD Temporary Form 144. The purpose of this Order is to establish the SID Witness Critique Form, Form 10.30.00, formerly known as the Witness Critique Form, LAPD Temporary Form 144. In addition, it also establishes the Records and Identification Division (R&I), Criminal Identification Section (CIS), Witness Critique Form, Form 10.31.00.

**PROCEDURE:** The forms shall be given to court personnel (e.g., judge, defense attorney(s), and district/city attorney) to rate the quality of expert witness testimony given by either SID personnel or CIS fingerprint examiners.

**I. ACTIVATION OF FORMS.** The SID, Witness Critique Form, and the R&I, CIS Witness Critique Form, are activated.

**A. Use of Forms.**

- \* The SID, Witness Critique Form is used to rate the expert witness testimony given by SID personnel.
- \* The R&I, CIS Witness Critique Form is used to rate the expert witness testimony given by CIS fingerprint examiners.

**B. Completion.** Completion of the forms is self-explanatory.

**C. Distribution.**

- 1 - Original, to employee's section training folder after reviewed by employee's supervisor.

1 - Total

- II. **EMPLOYEE'S RESPONSIBILITY.** The testifying expert witness shall complete the top portion of the form with their information before giving it to court personnel for completion.
- III. **SUPERVISOR'S RESPONSIBILITY.** Supervisors shall review the form(s) and identify any training issues needed to improve the quality of the employee's expert witness testimony.

**FORMS AVAILABILITY:** The SID, Witness Critique Form, Form 10.30.00, and the R&I, CIS Witness Critique Form, Form 10.31.00, will be available from the Department of General Services, Distribution Center, in approximately 60 days. Copies of the forms are attached for immediate use.

**AMENDMENTS:** This Order adds Department Manual Sections 5/10.30.00 and 5/10.31.00.

**AUDIT RESPONSIBILITY:** The Commanding Officer, SID, and the Commanding Officer, R&I Division, shall monitor compliance with this directive in accordance with Department Manual Section 0/080.30.



WILLIAM J. BRATTON  
Chief of Police

Attachments

DISTRIBUTION "E"

LOS ANGELES POLICE DEPARTMENT  
SCIENTIFIC INVESTIGATION DIVISION

## WITNESS CRITIQUE FORM

The purpose of this questionnaire is to provide information to the management of Scientific Investigation Division (SID) with which we may evaluate and upgrade the quality of court testimony given by SID personnel. Your thoughtful response and time spent is greatly appreciated. You are asked to complete the numbered items.

After completing this card, fold in half and tape.

DO NOT USE STAPLES

Place the card in the U.S. mail

Div. or Dept. \_\_\_\_\_ Date \_\_\_\_\_

Defendant \_\_\_\_\_ Victim \_\_\_\_\_

Court Case or DR # \_\_\_\_\_ Verdict \_\_\_\_\_

SID Employee Testifying \_\_\_\_\_

1. Was Testimony clear/explicit?

Yes ☐ Somewhat ☐ No ☐

2. Was SID's Employee's appearance appropriate?

Yes ☐ Somewhat ☐ No ☐

3. Was SID's Employee's demeanor professional?

Yes ☐ Somewhat ☐ No ☐

4. Was SID's Employee properly prepared/knowledgeable?

Yes ☐ Somewhat ☐ No ☐

5. Did SID's Employee confine responses to questions asked?

Yes ☐ Somewhat ☐ No ☐

6. Comments on testimony:

7. Person Submitting \_\_\_\_\_

Title: Judge \_\_\_\_\_ DA \_\_\_\_\_ CA \_\_\_\_\_ PD \_\_\_\_\_ Def \_\_\_\_\_ Other \_\_\_\_\_

Phone \_\_\_\_\_

Thank you for your assistance.

Commanding Officer, Scientific Investigation Division

(323) 415-8100

**LOS ANGELES POLICE DEPARTMENT**  
**Records & Identification Division/Criminal Identification Section**

**WITNESS CRITIQUE FORM**

The purpose of this questionnaire is to provide information to management that may allow an evaluation of the quality of court testimony furnished by our fingerprint examiners. It is our intention to provide the highest level of honest, reliable, and professional testimony to the criminal justice system. Thank you for your time and thoughtful responses in helping us maintain this standard of excellence.

After completing this card, please fold in half and tape.

DO NOT USE STAPLES

Place card in the US Mail

Court DIV or DEPT: \_\_\_\_\_ DATE: \_\_\_\_\_ Court Case: \_\_\_\_\_

Examiner Testifying \_\_\_\_\_

*POOR    EXCELLENT*

- |   |   |   |   |   |   |
|---|---|---|---|---|---|
| 1. The witness spoke clearly and confidently.           | 1 | 2 | 3 | 4 | 5 |
| 2. The witness demonstrated strong technical knowledge. | 1 | 2 | 3 | 4 | 5 |
| 3. Witness confined responses to questions asked.       | 1 | 2 | 3 | 4 | 5 |
| 4. Witness maintained neutrality toward all parties.    | 1 | 2 | 3 | 4 | 5 |
| 5. Witness was credible.                                | 1 | 2 | 3 | 4 | 5 |
| 6. Witness was on time to court.                        | 1 | 2 | 3 | 4 | 5 |
| 7. Witness maintained eye contact with court members.   | 1 | 2 | 3 | 4 | 5 |

8. Additional Comments: \_\_\_\_\_

\_\_\_\_\_

Person Submitting \_\_\_\_\_

Title: Judge \_\_\_\_\_ District Attorney \_\_\_\_\_ City Attorney \_\_\_\_\_ Attorney for the Defense \_\_\_\_\_

Phone and/or E-mail: \_\_\_\_\_

Thank you for your assistance.  
Commanding Officer, Records & Identification Division  
(213) 485-2601